question of intervention by them does not *arise.

गुजरात में अनुसूचित जातियों/अनुसूचित जनजातियों हेतु कल्याण योजनाओं के अधीन निर्धारित किये गये लक्ष्य

4410 **श्री राम सिंह राठवा :** क्या स्वास्थ्य और परिवार कल्याण मंत्री यह बताने कृपा करेंगे कि :

(क) गत वर्ष के दौरान गुजरात में अनुसूचित जातियों/अनुसूचित जनजातियों हेतु कल्याण योजनाओं के अन्तर्गत किये जाने के लिए क्या लक्ष्य निर्धारित किये गये थे ;

(ख) इन लक्ष्यों प्राप्त करने में किस हद तक सफलता मिली है ;

(ग) इन लक्ष्यों को प्राप्त करने में विफलता के क्या कारण हैं ?

स्वास्थ्य और परिवार कल्याण मंत्रालय में राज्य मंत्री (श्रीमती डी० के० तारा देवी सिद्धार्थ) : (क) से (ग) गुजरात सरकार से सूचना एकत्र की जा रही है और सभा पटल पर रख दी जाएगी।

Facilities *tmt* cancer treatment

4411. SHRI MENTAY PADMANABHAM; Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the estimated number of people suffering from cancer all over the country;

(b) what measures are being taken to control cancer;

(c) whether it is a fact that the exis+ing treatment facilities are inadequate, result ing in the death of a large number of cancer patients;

(d) if so, what steps are being .taken to increase the medical facilities in tb« country to combat cancer; and

(e) whether -here [is] any proopsal to include cancer control in the list of National Health Programmes?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THAR A DEVI SIDDHARTHA): (a) It is estimated that at any given point of time, there ar* about 1.5 to 2 million cancer patien's in india.

(b)to (e) Under the National Cancer Con. irol Programme of this Ministry specified Regional Cancer Centres in the country, having comprehensive diagnostic and treatment facilities in cancer are provided with grant-in-aid Financial assistance @ Rs. 20.00 lakhs per unit is also provided for setting up of Cobalt therapy units in hospitals and medical colleges. In order to augment cancer treatment facilities in the country and to fill up geographical gaps, a scheme for development of Oncology Wings in Govt. Medical Colleges/hospitals has been initiated from the year 1990-91. Under the scheme, an amount upto Rupees One crore is provided in phases for purchase of equipments while civil works and manpower are to be provided by the State Govt./institution. Simultaneously. a scheme for District Projects for health education, early detection and pain relief measures has been initiated and an amount of Rs. 15,00 lakhs, is provided to being with to the concerned state Government for each district selected for the purpose. Besides, financial assistance is also provided to eligible voluntary organisations for undertaking health *ducation and early detection of cancsr activities.

Amedment in A Indian Medical Cornel A*

4412. SHRI MENTAY PADMANABHAM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

fa) whether there is any proposal under Govemment's cbnsideration to amend the Indian Medical Council Act to make it an effective organisation to monitor and regulate Mh» medital profetion

(b) if so, what are the details thereof; and

(c) whether it is a fact that many State Government are flouting the norms specified by (the Indian Medical Council in establishing medical colleges; and

(d) if so, what steps Government propose *to* take to rectify this anomaly?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA): (a) to (d) The proposed amendment to Indian Medical Council Act, *interalia,* provide for the establishment of an Ethics and Disciplinary Committee which will function as an Appellate authority in respect of disciplinary cases decided by the State Medical Councils.

At present, prior permission of the Medical Council of India is not required to start a medical college. Hence, some medical colleges without appropriate facilities have been set up during the last few years. In order to plug this loophole, it is proposed to suitably amend the Indian Medical Council Act, 1956, which provides for obtaining the prior permission of the M.C.L/Govt. of India before establishing a medical college

स्वतंत्रता सेनानियों के रक्त संबंधियों के लिए आयुर्विज्ञान महाविद्यालयों में आरक्षण

4413. **श्री शिवप्रसाद चनपुरिया** : क्या **स्वास्थ्य और परिवार कल्याण** मंत्री यह बताने की कृपा करेंगे कि :

(क) देश में किन-किन आयुर्विज्ञान महाविद्यालयों में स्वतंत्रता सेनानियों के पुत्रों, पुत्रियों और पौत्रों/पौत्रियों के प्रवेश के लिए कोटा आरक्षित किया गया है ;

(ख) प्रत्येक महाविद्यालय में ऐसे व्यक्तियों के लिए कितने प्रतिशत आरक्षण कोटा है ;

(ग) ऐसे महाविद्यालयों में प्रवेश के लिए क्या मानदण्ड निर्धारित किए गए हैं ; और

(घ) 1992 में किन-किन महाविद्यालयों में स्वतंत्रता सेनानियों के पुत्रों/पुत्रियों और पौत्रों को प्रवेश दिया गया और प्रत्येक महाविद्यालय में ऐसे कितने व्यक्तियों को प्रवेश दिया गया है ?

स्वास्थ्य और परिवार कल्याण मंत्रालय में राज्य मंत्री (श्रीमती डी० के० तारादेवी सिद्धार्थ) : (क) से (घ) देश में केन्द्रीय सरकारी चिकित्सा संस्थाओं में स्वतंत्रता सेनानियों के बच्चों/आश्रितों के लिए कोई आरक्षण नहीं है। स्वतंत्रता सेनानियों के बच्चों सहित विभिन्न श्रेणियों के लिए राज्य मेडिकल कालेज में दाखिले हेतु आरक्षण सीधे राज्य सरकारों द्वारा उनकी अपनी नीतियों के अनुसार किया जाता है।

Patients treated by the hospitals! run by Delhi Administration

4414. SHRI SUBRAMANIAM SWAMY:
SHRI RAM GOPAL *YADAV:*

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of hospitals which arc run by the Delhi Administration in Delhi;

(b) what arc the details of patients treated in these hospitals during the last three years a$_s$ out-patients and in-patients;

(c) whether the Ministry have assessed any demand for health services in Delhi;

(d) what would be the required number of beds in hospitals during the next three years; and

(e) the steps being taken to meet 'his demand?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE, (SHRIMATI D. K. THARA DEVI SIDDHARTHA): (a) Delhi Administration is running 12 hospitals in the city.